


TRANSMITTAL OF UTILITY APPLICATION UNDER 37 C.F.R. §1.53		Attorney Docket No.	22877-6230		
		First named inventor	Chih-Ming Lin		
		Express mail label #	EV335462939US		
		Date of mailing	<u>July 28, 2003</u>		
Application Elements		Accompanying Application Papers			
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input checked="" type="checkbox"/> Specification containing 17 pages (including Claims and Abstract). a. Title: COMPACT HOLOGRAPHIC DATA STORAGE SYSTEM b. Number of claims: 15 3. <input checked="" type="checkbox"/> 8 sheets of drawings 4. <input checked="" type="checkbox"/> Declaration for Patent Application and Appointment of Attorney 5. <input type="checkbox"/> Sequence Listing <input type="checkbox"/> Paper copy (identical to computer copy) <input type="checkbox"/> Computer readable copy <input type="checkbox"/> Verified statement		6. <input type="checkbox"/> Copy of assignment documents from parent applications 7. <input type="checkbox"/> Preliminary Amendment 8. <input checked="" type="checkbox"/> Information Disclosure Statement 9. <input checked="" type="checkbox"/> Return Receipt Postcard 10. <input type="checkbox"/> Small Entity Statement 11. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent.			
		SIGNATURE OF ATTORNEY/AGENT			
		HELLER EHRMAN WHITE & McAULIFFE LLP  David A. Hall Registration Number: 32,233			
<input checked="" type="checkbox"/> Benefit of priority: Benefit of priority to Taiwanese Patent Application Serial No. 092109968 filed April 29, 2003. The subject matter of that patent application is incorporated into this application in its entirety.					
CORRESPONDENCE ADDRESS					
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22151 U.S. PTO
10/628988


14202 U.S. PTO
07/28/03

FEE TRANSMITTAL ACCOMPANYING UTILITY APPLICATION UNDER 37 C.F.R. §1.53	Attorney Docket No.	22877-6230
	First named inventor	Chih-Ming Lin
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FEE CALCULATION FOR CLAIMS AS AMENDED

a)	Basic Fee	\$750/\$375	\$ <u>750.00</u>
b)	Independent Claims	<u>1</u> - 3 = <u>0</u> x \$84/\$42	\$ <u>0.00</u>
c)	Total Claims	<u>15</u> - 20 = <u>0</u> x \$18/\$9	\$ <u>0.00</u>
d)	Fee for Multiple Dependent Claims = \$280/\$140		\$ <u>0.00</u>
TOTAL FILING FEE			\$ <u>750.00</u>

- ☐ Applicant is a small entity.
- ☒ A check is enclosed in the amount of \$750.00 to cover the fee for filing the application.
- ☐ Charge \$ _____ to Deposit Account No. 50-1213.
- ☒ The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

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Submitted by:			
Typed or printed name	David A. Hall		Reg. Number 32,233
Signature	<i>David A. Hall</i>	Date 7/28/03	Deposit Account 50-1213